## ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate le	vel produced by rate revision effective	03/01/13 -4.0%
(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial	the state of the s	
Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail	07.040.500	-0.1%
15. Other Workers compensation Line of Insurance	27,912,569	-0.1%
Does filing only apply to certain territory (	territories) or certain classes? If so, specify	r: This filing applies to all classes
Brief description of filing (If filing follows	rates of an advisory organization, specify	organization): Adopt NCCI loss costs
referenced in circular IL-2012-01 and cha	nge LCMs.	
*A divisted to reflect all prior rate changes		
*Adjusted to reflect all prior rate changes. **Change in Company's premium level w	nich will result from application of new rate	S.
	Accident Fund	Insurance Company of America
		Name of Company
	Fred Var	v Stream
		Official – Title

### **ILLINOIS DEPARTMENT OF INSURANCE**

Change in Company's premium or rate lev	ver produced by rate revision effective <u>D</u>	3-01-13
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	<u> Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial _		
2. Automobile Physical Damage		
Private Passenger Commercial	1.00	
3. Liability Other Than Auto		
<ol> <li>Burglary and Theft</li> <li>Glass</li> </ol>		
5. Glass 6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail	47.040.040	0.40/
15. Other Workers compensation Line of Insurance	17,843,919	0.4%
Does filing only apply to certain territory (t	erritories) or certain classes? If so, speci	fy: This filing applies to all classes
Brief description of filing. (If filing follows	rates of an advisory organization, speci	fy organization): Adopt NCCI loss costs
referenced in circular IL-2012-01 and cha	nge LCMs.	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level when the company is a second company.		es.
	Δ	ccident Fund General
		Name of Company
	Fred	Van Streain
	**************************************	Official - Title

### **ILLINOIS DEPARTMENT OF INSURANCE**

Change in Company's premium or rate le	evel produced by rate revision effective	03-01-13 -2.6%
(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
<ol> <li>Automobile Liability Private         Passenger Commercial</li> <li>Automobile Physical Damage         Private Passenger Commercial</li> <li>Liability Other Than Auto</li> </ol>		
<ul><li>4. Burglary and Theft</li><li>5. Glass</li><li>6. Fidelity</li></ul>		
7. Surety		
<ul><li>8. Boiler and Machinery</li><li>9. Fire</li></ul>		
<ul><li>10. Extended Coverage</li><li>11. Inland Marine</li></ul>		
12. Homeowners 13. Commercial Multi-Peril		
Crop Hail     Other Workers compensation     Line of Insurance	4,200,706	-1.7%
	(territories) or certain classes? If so, specif	y: This filing applies to all classes.
	s rates of an advisory organization, specif	
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	which will result from application of new rate	
	Ac	cident Fund National Name of Company
	Fred U	Yan Streain
		Official – Title

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
١.	Burglary and Theft		
5.	Glass		
3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
€.	Fire		
0.	Extended Coverage		
	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
	Other Workers' Compensation	\$1,063,330	2.60%
	Line of Insurance		
)oe	s filing only apply to certain territory (t	erritories) or certain classes? If so, specify:	Yes, we are increasing the
	Cost Multipliers for the Base Classes and the		
	, , ,	rates of an advisory organization, specify orga	inization): We are adopting
ne N	CCI loss costs IL-2012-01 effective March 1, 2	2013, and revising our Loss Cost Mulitpliers.	
	usted to reflect all prior rate changes.		
*Cr	ange in Company's premium level w	hich will result from application of new rates.	
		Addison	Insurance Company
		Na	me of Company
		Allen R. Sorense	n, VP - Corporate Underwriting
			Official – Title

FORM (RF-3)

### SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Privat	e	
Passenger		
Commercial		
Automobile Physical Dam	ag	
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Workers Compensation	\$2,931,382	7.0%
Life of Insurance		
Does filing only apply to d	ertain territory (territories) or	certain
Classes? If so,	,	
specify: No		
· · · · · · · · · · · · · · · · · · ·	(If filing follows rates of an a	dvisory
Organization, specify		
organization):	Delay Adoption of NCCI C	ircular IL-2012-04.
*Adjusted to reflect all prid	or rate changes	
	orrate changes. Fremium level which will resul	It from application of nev
rates.	deminin level willen will lesu	к потгаррясавоп от неч
iucs.	Association Insura	nce Company
		me of Company
	Contra D. Edwards Contra	Vice President Concret Councel & Sec

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail	450 420	
15.	Other Workers' Compensation	458,430	-5.4
	Line of Insurance		
loge t	filing only apply to certain territory (terr	ritories) or certain classes? If so, specify:	
	ges to specific class code deviations s		
011.011	ges to specific class code deviations		
Brief :	description of filing (If filing follows r	ates of an advisory organization, specify of	organization):
	pting the 1/1/13 rate change with an over		organización).
		nd approved deviations for group I, II, III	and group IV The only
		and 3257 which are going from group I to	

American Select Insurance Co. Name of Company

Rhonda Roberts, CIC Line of Business Specialist Commercial Underwriting Office Official - Title

<sup>\*</sup> Adjusted to reflect all prior rate changes.
\*\* Change in Company's premium level which will result from application of new rates.

Ch	ange in Company's premium or rate le	evel produced by rate revision effective	01/01/2013
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
15.	Other Workers' Compensation	\$ 16,807,515	-5.5%
	Line of Insurance		
	es filing only apply to certain territory (to es to all territories and classes.	erritories) or certain classes? If so, specify	<i>r.</i>
		ates of an advisory organization, specify of (NCCI Filing Circular # IL-2012-04) with current LCI	
	usted to reflect all prior rate changes. nange in Company's premium level wh	ich will result from application of new rate	s.
		Chubb Indemnity Insurance	e Company
		Chabo maching insurance	Name of Company
		Vian Brasidant	Lill Auf

Ch	ange in Company's premium or rate le	vel produced by rate revision effective	01/01/2013
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4,	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9. 10	Fire Extended Coverage		
	Inland Marine		
	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	\$ 25.727,536	-4.9%
	Line of Insurance		
_	- Fit to to be a section to - to -	estation) or cortain classes? If so, speci	fu-
		erritories) or certain classes? If so, speci	iy.
Appu	ies to all territories and classes.		A CONTRACTOR OF THE PROPERTY O
Brie	of description of filing, (If filing follows ra	ates of an advisory organization, specify	organization):
Adop	ption of the 1/1/13 loss costs published by NCCI	(NCCI Filing Circular # IL-2012-04) with current LC	CMs effective 1/1/13
	justed to reflect all prior rate changes. nange in Company's premium level wh	ich will result from application of new rat	es.
		Federal Insurance Compa	anv
		receia insurance comp	Name of Company
		Vice President	Full-Anh
			Official Title

Ch	ange in Company's premium or rate le	evel produced by rate revision effective	01/01/2013
	(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Liability Private		
2.	Passenger Commercial Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail	0.505.033	-8.9%
15.	Other Workers' Compensation	\$ 2,565,677	-8.9%
	Line of Insurance		
	es filing only apply to certain territory (to es to all territories and classes.	erritories) or certain classes? If so, speci	fy:
		ates of an advisory organization, specify (NCCI Filing Circular # IL-2012-04) with current LC	
	usted to reflect all prior rate changes. nange in Company's premium level wh	ich will result from application of new rat	es.
		Great Northern Insurance	e Company
		Great Hotthern Histiranice	Name of Company
		Vice President	Soul tale

FORM (RF-3)

Change in Company's premiu	um or rate	level produced	by rate revision
effective March 1, 2013		•	-

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or.) **
1.	Automobile Liability Private	volume (minois)	Change (+or-) **
١.	Passenger		
	Commercial		
2	Automobile Physical Damag		
<b>-</b> .	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
, . 8.	Boiler and Machinery		
3. 9.	Fire	<u> </u>	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
13. 14.			47547-17-47-17-18-18-18-18-18-18-18-18-18-18-18-18-18-
15.	Crop Hail	9.000.072	0.00/
15.	Other Workers Compensation  Life of Insurance	8,960,672	-3.8%
	Life of insurance		
•	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,	, ,	
	specify: No		
	Brief description of filing. (If fi	ling follows rates of an ac	dvisory
	Organization, specify		•
	organization):	Adoption of NCCI loss	costs and rating values per NCCI
	Approval Circular IL-2012-04 for ne	ew and renewal policies effec	tive on or after March 1, 2013.
	*Adjusted to reflect all prior ra		
	**Change in Company's prem	ium level which will resul	t from application of new
	rates.		
			Reinsurance Company
			me of Company
		Karen Bethea - A	
		(	Official – Title

Effective	date	04/01/13
Filing Date:	42/10/20	312

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

April 01, 2013

		(1)	(2) Annual Premium	(3) Percent
	Co	verage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability I	Private		
	Passenger Commercial			
2.	Automobile Physical		<del></del>	<del></del>
	Private Passenger C			
3.	Liability Other Than			
4.	Burglary and Theft	, idio		
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machiner	y		
9.	Fire			
10.	Extended Coverage			
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Pe	eril		
14.	Crop Hail			
15.		Compensation	34,078,002	3.1%
	Line of	Insurance		
Door	thia filina anlu annlu ta	cortain torritory	(torritorios) or cortain o	laccae?
	this filling only apply to specify:	Certain territory	(territories) or certain o	No
11 50,	apecity.			

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Accident and Indemnity Company will deviate -30% from the group rates. including a loading for our own expenses with an expense multiplier of 1.205.

\* Adjusted to reflect all prior rate changes.

Hartford Accident and Indemnity Company
Name of Company
Anne M. Bilodeau
Pricing Consultant
Official-Title

<sup>\*\*</sup> Change in the company's premium level which will result from application of new rates.

Effective 04/01/13

		Filing Date:	12/10/2012	
	IOIS DEPARTMENT OF INSURANCE MARY SHEET			
	ige in Company's premium or rate level revision effective	produced by	April 01, 2013	
	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**	
	Coverage	Volume (minois)	Change (1 Of -)	
1.	Automobile Liability Private			
	Passenger Commercial			
2.	Automobile Physical Damage			
_	Private Passenger Commercial			
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6. 7.	Fidelity	<del></del>		
7. 8.	Surety			
o. 9.	Boiler and Machinery Fire			
9. 10.	Extended Coverage			
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril		<del></del>	
14.	Crop Hail			
15.	Other Workers' Compensation Line of Insurance	12,871,589	28.8%	
	this filing only apply to certain territory, specify:	(territories) or certain o	classes?	

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Casualty Insurance Company will deviate 20% from the group rates. including a loading for our own expenses with an expense multiplier of 2.066.

Hartford Casualty Insurance Company Name of Company Anne M. Bilodeau Pricing Consultant Official-Title

<sup>\*</sup> Adjusted to reflect all prior rate changes.
\*\* Change in the company's premium level which will result from application of new rates.

Effective DAte 04/01/13

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

April 01, 2013

		(1)	(2) Annual Premium	(3) Percent
		Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automot	pile Liability Private		
		ger Commercial		
2.	-	oile Physical Damage		
		Passenger Commercial		
3.		Other Than Auto	<del></del>	
4.	•	and Theft		
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler ar	nd Machinery		
9.	Fire			
10.	Extende	d Coverage		
11.	Inland M	larine		
12.	Homeow	ners		
13.		cial Multi-Peril		
14.	Crop Ha	il		
15.	Other	Workers' Compensation Line of Insurance	18,993,433	3.1%
Does	thie filing o	only apply to certain territory	(territories) or certain o	daceae?
	specify:	only apply to certain territory	(territories) of certain c	No
11 30,	specify.			

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Fire Insurance Company will deviate -10% from the group rates. including a loading for our own expenses with an expense multiplier of 1.55.

\* Adjusted to reflect all prior rate changes.

Hartford Fire Insurance Company
Name of Company
Anne M. Bilodeau
Pricing Consultant
Official-Title

<sup>\*\*</sup> Change in the company's premium level which will result from application of new rates.

#### ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective

April 01, 2013

		(1)	(2) Annual Premium	(3) Percent
		Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automob	ile Liability Private		
		er Commercial		
2.	•	ile Physical Damage		
		assenger Commercial		
3.		Other Than Auto		
4.	Burglary	and Theft		
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler an	d Machinery		
9.	Fire			
10.	Extended	l Coverage		
11.	Inland Ma	arine		
12.	Homeow	ners		
13.	Commerc	cial Multi-Peril		
14.	Crop Hai	l		
15.	Other	Workers' Compensation	23,201,634	3.1%
		Line of Insurance		
Does	this filing o	nly apply to certain territory	(territories) or certain o	dasses?
	specify:	,	(	No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Insurance Company Of Illinois will deviate -20% from the group rates. including a loading for our own expenses with an expense multiplier of 1.378.

Hartford Insurance Company Of Illinois Name of Company Anne M. Bilodeau Pricing Consultant Official-Title

<sup>\*</sup> Adjusted to reflect all prior rate changes.
\*\* Change in the company's premium level which will result from application of new rates.

"Filing Date"	_	771177

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

April 01, 2013

		(1)	(2) Annual Premium	(3) Percent
		Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automob	ile Liability Private		
		er Commercial	•	
2.	·	ile Physical Damage	· · · · · · · · · · · · · · · · · · ·	<del></del>
		assenger Commercial		
3.		Other Than Auto		
4.	Burglary	and Theft		
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler an	d Machinery		
9.	Fire			
10.		d Coverage		
11.	Inland Ma	arine		
12.	Homeow			
13.		cial Multi-Peril		
14.	Crop Hai			
15.	Other	Workers' Compensation Line of Insurance	41,982,933	3.1%
Does	this filina o	nly apply to certain territory	(territories) or certain o	lasses?
	specify:	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Insurance Company of the Midwest will deviate -15% from the group rates. including a loading for our own expenses with an expense multiplier of 1.464.

Hartford Insurance Company of the Midwest
Name of Company
Anne M. Bilodeau
Pricing Consultant
Official-Title

<sup>\*</sup> Adjusted to reflect all prior rate changes.

<sup>\*\*</sup> Change in the company's premium level which will result from application of new rates.

Effective Date 04/01/13

Filing Date:	12/10/2012
i iiiig Date.	12/10/2012

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

April 01, 2013

		(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automob	oile Liability Private		
٠.		er Commercial		
2.	_	pile Physical Damage	<del></del>	
		Passenger Commercial		
3.		Other Than Auto	<del></del>	
4.		and Theft		***************************************
5.	Glass	and men		
6.	Fidelity			
7.	Surety		<del></del>	
8.	•	nd Machinery		
9.	Fire	id Wacimicity		
10.		d Coverage		<del> </del>
11	Inland M	•		
12.	Homeov			<del></del>
13.		cial Multi-Peril		
14.	Crop Ha			
15.	Other	Workers' Compensation	27,158,099	3.1%
		Line of Insurance		
Does	this filing o	only apply to certain territory	(territories) or certain of	classes?
	specify:	, ,,,,,	,	No
	• •			

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Hartford Underwriters Insurance Company will deviate 10% from the group rates. including a loading for our own expenses with an expense multiplier of 1.894.

\* Adjusted to reflect all prior rate changes.

\*\* Change in the company's premium level which will result from application of new rates.

Hartford Underwriters Insurance Company
Name of Company
Anne M. Bilodeau
Pricing Consultant
Official-Title

FORM (RF-3) - - -

### SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective HDI-Gerling America Insurance Company. 0/-0/-20/3

<u>-</u>	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private	volume (minois)	Charige (101-)
١.	Passenger		
	Commercial		
2	Automobile Physical Damag		
-	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
3. 3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
). 9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	\$230,492	-8.9%
10.	Life of Insurance	Ψ200, <del>4</del> 02	-0.3%
	Life of insurance		
	Does filing only apply to certai	n territory (territories) or o	certain
	Classes? If so,		
	specify: No		
	Brief description of filing. (If fil	ling follows rates of an ad	lvisory
	Organization, specify		
	organization):	Adoption of NCCI's Workers	s Compensation Loss Costs and
	Initial LCM filing.		
	*Adjusted to reflect all prior ra		
	**Change in Company's prem	ium level which will result	from application of new
	rates.		
			a Insurance Company
			ne of Company
		Kevin Purcell - Vice I	
		O	official – Title

### ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate le	evel produced by rate revision effective	3/1/2013
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial 3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity	1. C. 14 14 1.	
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	4.02-32-70	
14. Crop Hail	4 505 470	2.50/
15. Other Workers Compensation Line of Insurance	1,595,172	-3.5%
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	no
Brief description of filing. (If filing follows filing.	rates of an advisory organization, specify or	ganization): <u>NCCI loss costs adoptior</u>
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hich will result from application of new rates	
	Imperius	m Insurance Company
		Name of Company
	Kir	by Hill, President
		Official – Title

	Change in Company's premium o	r rate level produced by rate revision	n effective: 01/01/2013
	(1)	(2)	(3)
	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary & Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler & Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail	•	
15.	Worker's Compensation	\$765,468	-3.8%
16.	Other:		
	Line of Insurance iling only apply to certain territory specify:	(territories) or certain classes? NO	
	escription of filing. (If filing follows surance is taking NCCI rate chang	rates of an advisory organization, see specified in circular IL-2012-01.	specify organization):
	ted to reflect all prior rate changes. nge in Company's premium level which	will result from application of new rate	·s.

IMT Insurance Company Name of Company

FORM-(RF=3) -- -- -- -- -- --

### SUMMARY SHEET

Change in Company's premium or ra	ite level produced by rate revision
effective 01/01/2013	

- -	(1)	(2) Annual Premium	(3) Percent
4	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
_	Commercial		
2	Automobile Physical Damag		•
	Private Passenger		
2	Commercial		
3.	Liability Other Than Auto		
4. -	Burglary and Theft		
5.	Glass	· · · · · · · · · · · · · · · · · · ·	
6. 7	Fidelity	***************************************	
7.	Surety	<del></del>	
8.	Boiler and Machinery		
9. 40	Fire		
10.	Extended Coverage		
11. 12	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14. 15.	Crop Hail	<b>647</b> 000 040	0.550/
15.	Other Workers Compensation  Life of Insurance	\$17,600,818	-2.55%
	Life of insurance		
•	Does filing only apply to certa	ain territory (territories) or	certain
	Classes? If so,	,	
	specify: Yes. 73	880,8742,8810,8824,8825,882	6,8829,8832,8835,8842,8864,
	8868,9015,9040.		
	Brief description of filing. (If f	filing follows rates of an ac	dvisory
	Organization, specify	•	-
	organization):		3 NCCI advisory rates with the
	exception of Nhrma Mutual class of	ode 9929 rate of \$3.59. All Nh	rma policies are written on a
	Loss Sensitive rating Plan.		
	*Adjusted to reflect all prior ra		
	**Change in Company's prem	nium level which will resul	t from application of new
	rates.		
		Nhrma Mutual Insu	
			ne of Company
		Lloyd Wiesemann,	VP-Insurance Services

### FORM (RF-3)

### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 61/01/2013 03/01/3013

-	(1)	(2) Annual Premium	(3) Percent
-	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial	*	
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
<b>3</b> .	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		**************************************
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	1,481,948	-0.1
	Life of Insurance		
•			
	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	specify: All Class	ses	
	Brief description of filing. (If fi	lling follows rates of an ac	dvisory
	Organization, specify organization):	Change from Illinois notes	to loop and adout 1 Old of 4 575
	organization).	Change from fillinois rates i	to loss cost, adopt LCM of 1.575
	*Adjusted to reflect all prior ra	te changes.	
	**Change in Company's prem		t from application of new
	rates.	North Pointe Insura	ince Company
			ne of Company
		Tina Knight - Analys	
			official – Title

Change in Company's premium or rate le	evel produced by rate revision effective	01/01/2013
(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial  2. Automobile Physical Damage Private Passenger Commercial  3. Liability Other Than Auto  4. Burglary and Theft  5. Glass  6. Fidelity  7. Surety  8. Boiler and Machinery  9. Fire  10. Extended Coverage  11. Inland Marine  12. Homeowners  13. Commercial Multi-Peril  14. Crop Hail		
15. Other Workers' Compensation Line of Insurance	\$ 8,494,224	-5%
Does filing only apply to certain territory (t Applies to all territories and classes.  Brief description of filing, (If filing follows r	erritories) or certain classes? If so, specify: rates of an advisory organization, specify org (NCCI Filing Circular # IL-2012-04) with current LCMs	ganization): effective 1/1/13
*Adjusted to reflect all prior rate changes. **Change in Company's premium level wh	nich will result from application of new rates.	
	Pacific Indemnity Company	
	N:	ame of Company

Change in Company's premium or rate level produced by rate revision effective April 1, 2013

		(1)	(2) Annual Premium	(3) Percent
		<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automok	pile Liability		
	Private F	Passenger		
	Commer	cial		
2.	Automot	oile Physical Damage		
	Private F	Passenger		
,	Commer	cial		
3.	Liability	Other Than Auto		
4.	Burglary	and Theft		
<b>5</b> .	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler ar	nd Machinery		
9.	Fire			
10.		d Coverage		
11.	Inland M	larine		
12.	Homeow	vners		
13.		cial Multi-Peril		444
14.	Crop Ha	il		
15.	Other _	Workers Comp	437,000 (2011)	-5.0%
		Line of Insurance		
	filing only a	pply to certain territory (terr	ritories) or certain classes? If so, specify:	
No				
Brief o	description of	of filing. (If filing follows rate	es of an advisory organization, specify organizati	ion):
			r IL-2012-04) and change LCM, to be effective	

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

**Pioneer Specialty Insurance Company** 

Name of Company

Arlene Silvia -Sr. Product Development Analyst

### FORM (RF-3)

### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 2/01/20/3

(1)	(2) Annual Premium	(3) Percent
Coverage	<ul><li>Volume (Illinois) *</li></ul>	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger	•	•
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery	***************************************	
Fire	<del>(</del>	
Extended Coverage		
Inland Marine	*	N
Homeowners		***
Commercial Multi-Peril		
Crop Hail		
Other Workers Compensation	46.260.724	.0.4
Life of Insurance	16,368,734	+0.4
Life of modifice		
Does filing only apply to cer Classes? If so,	tain territory (territories) or	certain
specify: All Cla	asses	
Brief description of filing. (If Organization, specify	filing follows rates of an a	dvisory
organization):	Change from Illinois rates	to loss cost, adopt LCM of 1.810
, , , , , , , , , , , , , , , , , , ,		
*Adjusted to reflect all prior	rate changes.	
**Change in Company's pre		It from application of new
rates.		• •
	Praetorian Insuran	ce Company
	Na	me of Company
	Tina Knight - Analys	, ,
		Official – Title

Filing Date:	<del>12/10/201</del> 2

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

April 01, 2013

		(1)	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	. ,	Coverage	volume (minois)	Change (+ or -)
1.	Automob	ile Liability Private		
		er Commercial		
2.		ile Physical Damage		
		assenger Commercial		
3.		Other Than Auto		
4.	•	and Theft		
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler an	d Machinery		
9.	Fire			
10.	Extended	d Coverage		
11.	Inland M	arine		
12.	Homeow	ners		
13.	Commer	cial Multi-Peril		
14.	Crop Hai	1		
15.	Other	Workers' Compensation Line of Insurance	#N/A	26.4%
		Line of insurance	•	
Does	this filing o	nly apply to certain territory	(territories) or certain (	rlasses?
	specify:	in apply to certain territory	(territorico) or ocitalir t	No
., 55,	-p-0011.j.			

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Property and Casualty Insurance Company of Hartford will deviate 30% from the group rates. including a loading for our own expenses with an expense multiplier of 2.239.

\* Adjusted to reflect all prior rate changes.

Property and Casualty Insurance Company of Hartford
Name of Company
Anne M. Bilodeau
Pricing Consultant
Official-Title

<sup>\*\*</sup> Change in the company's premium level which will result from application of new rates.

Change in Company's premium or rate le	evel produced by rate revision effective	03/01/2013
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial	****	
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery 9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	166,154	-3.29%
Line of Insurance		
Does filing only apply to certain territory	(territories) or certain classes? If so, specify:	N/A
boes ming only apply to certain territory	(territories) or certain classes: if so, specify.	IV/A
Brief description of filing. (If filing follows NCCI 01/01/2013 voluntary rate changes	rates of an advisory organization, specify or to 03/01/2013. This is from circular IL-2012	ganization): <u>Delaying the adoption of</u> 2-03.
*Adjusted to reflect all prior rate changes		
**Change in Company's premium level w	hich will result from application of new rates	•
	DLL	
		nsurance Company Name of Company
	'	value of Company
	Tom Hokar	nson- Senior Analyst, IDA
		Official – Title

-	F	O	RI	M-	(F	۲F	-3)	
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### **SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision effective 6.3/0//2013.

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private	volume (minois)	_ Change (+01-)
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		•
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		***************************************
Commercial Multi-Peril		****
Crop Hail		
Other Workers Compensation	5.077.074	.40
Life of Insurance	5,677,971	+1.6
Life of insurance		
Does filing only apply to certa Classes? If so,	ain territory (territories) or	certain
specify: All Clas	ses	
Brief description of filing. (If	filing follows rates of an a	dvisory
Organization, specify		·
organization):	Change from Illinois rates	to loss cost, adopt LCM of 2.045
*Adjusted to reflect all prior ra		
**Change in Company's pren	nium level which will resu	It from application of new
rates.		
	QBE Insurance Co	
•		me of Company
	Tina Knight - Analy	
	(	Official – Title

FORM-(RF-3)

### SUMMARY SHEET

Change in Company's premium or ra	te level produced by rate revision
effective 04/01/2013	•

(1)	(2) Annual Premium	(3) Percent
Coverage	- Volume (Illinois) *	_ Change (+or-) **
Automobile Liability Priva	ite	
Passenger		
Commercial		
Automobile Physical Dan	nag	
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine	**************************************	
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Worker's Compensation	n \$7,600,663.00	6
Life of Insurance		
Does filing only apply to Classes? If so,	certain territory (territories) or	certain
specify: N/	<u>'A</u>	
Duinf description of films	//6 61: faller	
Organization, specify	(If filing follows rates of an a	luvisory
organization):	Adopting NCCI Advise	ory Rates and Misc Values
organization).	Adopting Nooi Adviso	by Nates and Misc Values
*Adjusted to reflect all pri		ult from application of pay
**Change in Company's   rates.	premium level which will resu	iit from application of nev
rates.	OF CLIDA Is a super	A NA: 4:   O

Name of Company

Daniel P Ferris - Vice President & General Counsel

Official – Title

FORM (RF=3)

### **SUMMARY SHEET**

Change in Company's premium or rat	e level produced by rate revision
effective <u>04/01/2013</u>	

(1)	(2) Annual Premium	(3) Percent
Coverage -	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
Liability Other Than Auto		
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other Worker's Compensation	\$18,832.00	+2.5
Life of Insurance		
Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
specify: N/A		· ·
Brief description of filing. (If fi	ling follows rates of an a	dvisory
Organization, specify		
organization):	Adopting NCCI Adviso	ory Rates and Misc Values
	and the second s	
*Adjusted to reflect all prior ra	to changes	
**Change in Company's prem		It from application of new

SECURA Supreme Insurance Company Name of Company Daniel P Ferris - Vice President & General Counsel

TELLISTE DEALS	10/10/00/0
Filing Date:	12/10/2012

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

April 01, 2013

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation Line of Insurance	21,395,871	3.1%
	this filing only apply to certain territory	(territories) or certain of	
If so,	specify:		No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Sentinel Insurance Company, Ltd. will deviate -25% from the group rates. including a loading for our own expenses with an expense multiplier of 1.292.

Sentinel Insurance Company, Ltd.
Name of Company
Anne M. Bilodeau
Pricing Consultant
Official-Title

<sup>\*</sup> Adjusted to reflect all prior rate changes.

<sup>\*\*</sup> Change in the company's premium level which will result from application of new rates.

FORM (RF-3)

### **SUMMARY SHEET**

Change in Company's pro	emium or rate le	evel produced by rate	e revision
effective 01/01/2013			

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
	Automobile Liability Private		
	Passenger		
	Commercial		
	Automobile Physical Damag		
	Private Passenger		
1	Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
,	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
1	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other Workers Compensation	5,244,354	0.0%
	Life of Insurance	0,244,004	0.070
	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	specify: No.		
	Brief description of filing. (If fi	-	-
	organization):	To adopt NCCI's 1-1-2	2013 workers comp loss costs.
		A	
	*Adjusted to reflect all prior ra **Change in Company's prem rates.		lt from application of new
		Sentry Casualty C	ompany
			mo of Company

Name of Company

Janel Danczyk, Compliance/Development Analyst

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	01/01/2013
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
<ol> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> <li>Fire</li> <li>Extended Coverage</li> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Multi-Peril</li> <li>Crop Hail</li> </ol>		
15. Other Workers Comp. Line of Insurance	\$2,074,840	-5.6%
	territories) or certain classes? If so, specify: s rates of an advisory organization, specif 04	y organization): Adopting New NCCI
'Adjusted to reflect all prior rate changes. *Change in Company's premium level w	hich will result from application of new rates	

Tokio Marine & Nichido Fire Insurance Company., Ltd

### ILLINOIS DEPARTMENT OF INSURANCE

Cha	ange in Company's premium or rate l	evel produced by rate revision effective	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
_	Passenger Commercial		
	Automobile Physical Damage Private Passenger Commercial		
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
15.	Other Workers Comp. Line of Insurance	\$374,632	-4.08%
Doe	es filing only apply to certain territory	(territories) or certain classes? If so, specify:	No, it applies to all Loss Costs
Brie Los:	f description of filing. (If filing follows Costs contained in circular IL-2012-	s rates of an advisory organization, specify -04	-
'Adj '*Ch	usted to reflect all prior rate changes nange in Company's premium level w	hich will result from application of new rates.	SURANCE COMPANY
			ame of Company  Official – Title

FORM-(RF-3)

Change in Company's premium or ra	te level produced by rate revision
effective 01/01/2013	

-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private	volume (minois)	_ Change (+01-)
••	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
1.	Burglary and Theft	<del>* - ***                               </del>	
5.	Glass		
3.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
€.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
4.	Crop Hail		
15.	Other Worker Compensation	417,568	-3.8%
	Life of Insurance		
•	Dans films and a such to a set		
	Does filing only apply to certa Classes? If so,	ain territory (territories) or	certain
	specify: N/A		
	specify.		
	Brief description of filing. (If f Organization, specify organization):	_	dvisory /C Voluntary Market-Advisory
	Rates, Loss Costs, and Rating Val	ues Effective January 1, 2013	В.
	*Adjusted to reflect all prior ra **Change in Company's premates.		It from application of new
		TransGuard Insura	ance Company of America, INC.
		Nai	me of Company
		Hannah Upchurch	- State Filing Analyst
			Official – Title

# ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate	evel produced by rate revision effective	01/01/2013
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
<ol> <li>Automobile Liability Private         Passenger Commercial</li> <li>Automobile Physical Damage         Private Passenger Commercial</li> <li>Liability Other Than Auto</li> <li>Burglary and Theft</li> <li>Glass</li> <li>Fidelity</li> <li>Surety</li> <li>Boiler and Machinery</li> <li>Fire</li> <li>Extended Coverage</li> <li>Inland Marine</li> <li>Homeowners</li> <li>Commercial Multi-Peril</li> <li>Crop Hail</li> <li>Other Workers Comp.         Une of Insurance     </li> </ol>	\$1,316,271	-4.41%
	(territories) or certain classes? If so, specify: I vs rates of an advisory organization, specify -04	
*Adjusted to reflect all prior rate changes **Change in Company's premium level w	hich will result from application of new rates.	

TRANS PACIFIC INSURANCE COMPANY

Name of Company

Official – Title

## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

April 01, 2013

		(1)	(2) Annual Premium	(3) Percent
		Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automob	ile Liability Private		
٠.		er Commercial		
2.	•	ile Physical Damage		
۷.		assenger Commercial		
3.		Other Than Auto		
3. <b>4</b> .	•	and Theft		_
5.	Glass	and their		
6.	Fidelity			
7.	Surety			
8.	•	d Machinery		
9.	Fire	,		
10.	Extended	d Coverage		
11.	Inland M	•		
12.	Homeow	ners		
13.	Commer	cial Multi-Peril		
14.	Crop Hai	1		
15.	Other	Workers' Compensation Line of Insurance	13,176,317	3.1%
Does	this filing o	nly apply to certain territory	(territories) or certain of	classes?
If so,	specify:			No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Trumbull Insurance Company will deviate -40% from the group rates. including a loading for our own expenses with an expense multiplier of 1.033.

\* Adjusted to reflect all prior rate changes.

Trumbull Insurance Company
Name of Company
Anne M. Bilodeau
Pricing Consultant
Official-Title

<sup>\*\*</sup> Change in the company's premium level which will result from application of new rates.

ramg pare Izitusutz	Filing Date:		12/10/2012
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## ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective

April 01, 2013

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private		
	Passenger Commercial		
2.	Automobile Physical Damage		
	Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass	-	
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation Line of Insurance	64,250,366	3.1%
Does	this filing only apply to certain territory	(territories) or certain of	dasses?
	specify:		No
			· · · · · · · · · · · · · · · · · · ·

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Twin City Fire Insurance Company will deviate 00% from the group rates. including a loading for our own expenses with an expense multiplier of 1.722.

\* Adjusted to reflect all prior rate changes.

Twin City Fire Insurance Company
Name of Company
Anne M. Bilodeau
Pricing Consultant
Official-Title

<sup>\*\*</sup> Change in the company's premium level which will result from application of new rates.

Cha	inge in Company's premium or rate lev	el produced by rate revision effective	3/1/2013
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
_	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
_	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5. c	Glass		
6. 7.	Fidelity		
7. 8.	Surety Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other Workers' Compensation	\$7,366,527	-0.52%
	Line of Insurance		
	Elite of modification		
Doe	es filing only apply to certain territory (te	erritories) or certain classes? If so, specify:	Yes, we are increasing the
	Cost Multipliers for the Base Classes and the D		
Brie	ef description of filing. (If filing follows ra	ates of an advisory organization, specify orgar	nization): We are adopting
	NCCI loss costs IL-2012-01 effective March 1, 2		
	justed to reflect all prior rate changes.		
**C	hange in Company's premium level wh	ich will result from application of new rates.	
		United Fire & Casua	
		Nan	ne of Company
			, VP - Corporate Underwriting
		C	Official – Title

### ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate	te level_produced_by rate_revision effective	2 03/01/13 -25%
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commerci	ial	
3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		
<ol> <li>Fidelity</li> <li>Surety</li> </ol>		
Surety     Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers compensation	28,082,961	-2.2%
Line of Insurance		
Does filing only apply to certain territor	ory (territories) or certain classes? If so, specif	y: This filing applies to all classes.
Brief description of filing. (If filing folloreferenced in circular IL-2012-01.	ows rates of an advisory organization, specif	y organization): <u>Adopt NCCI loss costs</u>
*Adjusted to reflect all prior rate change		
**Change in Company's premium leve	el which will result from application of new rate	<del>9</del> \$.
	Linited Wis	sconsin Insurance Company
	Onited vvis	Name of Company
	Fred	WAN Stream
		Official – Title

### Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Ch	ange in Company's premium or rate le	evel produced by rate revision effective	01/01/2013
01.	(1) Coverage	(2) Annual Premium Volume (Illinois).*	(3) Percent <u>Change (+ or -)**</u>
	Ooverage		
1.	Automobile Liability Private		
11. 12. 13.	Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail		
15.	Other Workers Compensation	\$ 1,902,519	-5.8%
Appl Brie Ador	ies to all territories and classes.  If description of filing, (If filing follows retion of the 1/1/13 loss costs published by NCC its	erritories) or certain classes? If so, speci- rates of an advisory organization, specify I (NCCI Filing Circular # IL-2012-04) with current LC	organization):  CMs effective 1/1/13
٠,	nenge in eemeent e premier it een in		
		Vigilant Insurance Comp	
			Name of Company

	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois) *	Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary & Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler & Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Worker's Compensation	\$7,132	-3.8%
16.	Other:		
	Line of Insurance iling only apply to certain territory pecify:	(territories) or certain classes? NO	

Wadena Insurance Company Name of Company

<sup>\*</sup>Adjusted to reflect all prior rate changes.
\*\*Change in Company's premium level which will result from application of new rates.

Change in Company's premium or rate level produced by rate revision effective April 1, 2013

		(1)	(2) Annual Premium	(3) Percent
		Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automol	bile Liability		
		Passenger		
	Comme	rcial		
2.		oile Physical Damage		
		Passenger		
	Comme			
3.	-	Other Than Auto		
4.		and Theft		
5.	Glass			
6.	Fidelity			
7.	Surety			
8.		nd Machinery		
9.	Fire			-
10.		d Coverage		
11.	Inland M			
12.	Homeov			
13.		rcial Multi-Peril		
14.	Crop Ha			
15.	Other _	Workers Comp	3,000,000 (2011)	-5.3%
		Line of Insurance		
Does f	iling only a	pply to certain territory (terr	ritories) or certain classes? If so, specify:	
	·			
			es of an advisory organization, specify organizar IL-2012-04) and change LCM, to be effective	

- \* Adjusted to reflect all prior rate changes.
- \*\* Change in Company's premium level which will result from application of new rates.

**Western National Mutual Insurance Company** 

Name of Company

Arlene Silvia - Sr Product Development Analyst

	Change in Company's premium or rate	level produced by rate revision effective	April 1, 2013
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	18,289,294	-5.3
	Line of Insurance		
-			
		ritories) or certain classes? If so, specify:	
cnai	nges to the deviations to specific class co	odes - see below	
D . (			
		rates of an advisory organization, specify of	organization):
#22	opting the 1/1/13 rate change with a an o	nd approved deviations for group I, II, III,	and group IV. The only shance
		nd approved deviations for group 1, 11, 111, 57 which are going from group I to group	
u	eviations is for class codes 4432 and 323	77 which are going from group 1 to group	11 0.202 (W1).

- \* Adjusted to reflect all prior rate changes.
  \*\* Change in Company's premium level which will result from application of new rates.

Westfield Insurance Co. Name of Company

Rhonda Roberts, CIC Line of Business Specialist Commercial Underwriting Office

### **SUMMARY SHEET**

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
3. 4.	Burglary and Theft		-
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation Line of Insurance	1,985,500	2.1
Does 1		ritories) or certain classes? If so, specify:	
Brief of Adoj	description of filing. (If filing follows r pting the 1/1/13 rate change with an over 3-12120. Keeping the previously filed ar	ates of an advisory organization, specify o	and group IV. The only change

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Westfield National Insurance Co.
Name of Company

Rhonda Roberts, CIC Line of Business Specialist Commercial Underwriting Office